UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

3235-0076 OMB Number: April 30, 2008 Expires:

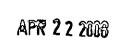
Prefix

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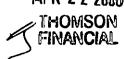
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DATE RECEIVED

Estimated average burden 16.00



PROCESSED



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an arr	nendment and name has changed, and indica	te change.)		
Kyoto Planet Group Inc./Offering of Con	amon Shares issued in exchange for co	nsulting services		
Filing Under (Check box(es) that apply): Type of Filing: New Filing	☐ Rule 504 ☐ Rule 505 ☐ Amendment	☑ Rule 506	☐ Section 4(6)	ULOE
	A. BASIC IDENTIFICA	TION DATA		
1. Enter the information requested about the				
Name of Issuer (☐ check if this is an	n amendment and name has changed, and ind	dicate change.)		
Kyoto Planet Group Inc.				D 190171 BATAN IOTTI BÜTNI BIYNI BIYNY KARAN ITRIN 1871 IADI
Address of Executive Offices Suite 2400, 1111 West Georgia Street, V	(Number and Street, City ancouver, British Columbia, Canada V6l		Telephone Number 604-681-5755	08046719
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City	y, State, Zip Code)	Telephone Number (In-	cluding Area Code)
Brief Description of Business			<u> </u>	-
"Green" investment company.				SE© Mall Processing Section
Type of Business Organization				600 a s s
	☐ limited partnership, already formed	☐ Other (pleas	e specify)	^{EPR} 152008
□ business trust	☐ limited partnership, to be formed			4 4000
trust	innited partitership, to be formed			
				- Vashinutan -
Actual or Estimated Date of Incorporation o	Month Year			Washington, DC
rectain or Estimated Date of Bicorporation o	or Organization: 0 6 0 6		п	-
		Actual	☐ Estimated	
Jurisdiction of Incorporation or Organization	•		CN	
	CN for Canada; FN for other foreign	n jurisdiction)	CN	
GENERAL INSTRUCTIONS				
Federal: Who Must File: All issuers making an offering of securities	s in reliance on an exemption under Regulation D or Section	n 4(6), 17 CFR 230.501 et:	seq. or 15 U.S.C. 77d(6).	
When To File: A notice must be filed no later than 15 days the SEC at the address given below or, if received at that ad				
Where to File: U.S. Somrities and Exchange Commission,	450 Fifth Street, N.W., Washington, D.C. 20549.	•		

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (5-05)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer,
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)			····	Managing Fartier
Reynolds, Damien					
Business or Residence Addres	s (Number and Str	ect, City, State, Zip Code)			
Suite 2400, 1111 West Georg	ia Street, Vancous	er. R.C., Canada V6E 4M3			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				Widinging Fattiet
Longview Capital Partners	Incorporated				
Business or Residence Addres		eet, City, State, Zip Code)			
Culta 2400 1111111 4 C		D.C. C. 1. 1/C. 444			
Suite 2400, 1111 West Georg Check Box(es) that Apply:	Promoter ☐	ver, B.C., Canada V6E 4ML3 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if	individuai)				
Poulus, Hein Business or Residence Addres	e (Number and St-	act City State 7:- Code			
Dusiness of Residence Address	s (Number and Str	æt, City, State, Zip Code)			
Suite 2400, 1111 West Georg					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				Managing Faithet
Icke, John					
Business or Residence Addres	s (Number and Str	et, City, State, Zip Code)	,		
6 14 2400 1111 111 40	1.6 11	B.O. O. I. 1//D 44/0			
Suite 2400, 1111 West Georg Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if	individual)				
Fodie, Ian					· · · · · · · · · · · · · · · · · · ·
Business or Residence Addres	s (Number and Str	eet, City, State, Zip Code)			
Suite 2400, 1111 West Georg	ia Street, Vancouv	er, B.C., Canada V6E 4M3			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Hamilton, June					
Business or Residence Addres	s (Number and Str	et, City, State, Zip Code)			
Suite 2400, 1111 West Georg	gia Street, Vancouv	er. B.C., Canada V6E 4M3			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, if	individual)		· · · · · · · · · · · · · · · · · · ·		Managing Partner
Business or Residence Addres	s (Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				теренер з мине
Ducings or Davidson Add	a (Number and Str	ant City State 71- Code			
Business or Residence Addres	s (Number and Str	za, City, State, ZIP Code)			
<u> </u>		 			

			-	В.	ĮNFORMA	TION ABO	UT OFFERI	NG				
1 11 -1				.1							Yes	No F
1. Has the	: issuer sold,	or does the						_	•••••			×
2 W/hat :-	the minim	m incontra			ppendix, Co		_				¢	minim
z. what is	What is the minimum investment that will be accepted from any individual?									. ა <u>no</u> Yes	minimum No	
Does th	Does the offering permit joint ownership of a single unit?								□ 140			
									_	_		
or simil listed is of the b	lar remunen an associat proker or de	ation for sol ed person or aler. If mor	icitation of r agent of a e than five (purchasers i broker or de 5) persons	n connectio aler register	n with sales red with the	of securitie SEC and/or	s in the offerwith a state	ring. If a p or states, li	erson to be st the name		
	h the inform ast name firs			dealer only.			<u> </u>			·		
					***	T . PP. 10.	24.5					
Business or F	Residence Ad	dress (Numbe	er and Street,	City, State, Z		<u>T APPLICA</u>	BLE	·				
				,,,	·F,							
Name of Ass	ociated Broke	er or Dealer										
	ich Person Li			ls to Solicit P	urchasers							
	ll States" or cl											All States
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[IN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[NT]	[TX]	[UT]	[VII]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)
Full Name (I	ast name firs	t, if individua	l)						•			
Business or F	Residence Ad	dress (Numbe	er and Street,	City, State, Z	ip Code)	·						
Name of Ass	ociated Broke	er or Dealer										
States in Whi	ich Person Li	sted Has Solid	cited or Intend	ls to Solicit P	urchasers							
	ll States" or cl						***************************************					All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY]	(LA)	(ME) [NY]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[RI]	[SC]	[SD]	[TN]	[NJ] [TX]	[NM] [UT]	[VT]	[NC] [VA]	[ND] [WA]	[OH] {WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Name (L	ast name firs	t, if individua	1)									
Business or F	Residence Ad	dress (Numbe	er and Street, (City, State, Z	ip Code)						_	
Name of Ass	ociated Broke	er or Dealer										
States in Whi	ich Person Li	sted Has Solid	cited or Intend	is to Solicit P	turchasers							
	II States" or cl											All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	(IN)	[lA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	(OR) [WY]	(PA] (PR)
		. ,										

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCI	C .	OFFERING PRICE.	NUMBER OF	F INVESTORS.	EXPENSES AN	D USE OF PROCEE	CDS
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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this both and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	x		
	Type of Security	Aggregate Offering Price	A	mount Already Sold
	Debt	\$	\$	
	Equity	\$_100,000* ⁽¹⁾	S 1	00,000* ⁽¹⁾
	☑ Common □ Preferred			
	Convertible Securities (including Warrants)	\$	\$	
	Partnership Interests	<u> </u>	s	
	Other (Specify)	\$	s	
	Total	\$_100,000* ⁽¹⁾	\$ 1	00,000* ⁽¹⁾
		3_100,000	<u>"_1</u>	00,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	te		
		Number Investor		Aggregate Dollar Amount of Purchases
	Accredited Investors	<u>1</u>	_ \$	<u> 100,000*⁽¹⁾</u>
	Non-accredited Investors	<u>0</u>	_ \$	<u> </u>
	Total (for filings under Rule 504 only)	<u>N/A</u>	_ s	SN/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securitie sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	st		D. II.
	Type of offering	Type of Security		Dollar Amount Sold
	Rule 505	•	5	SOIG S N/A
	Regulation A		- 5	N/A
	Rule 504		- °	N/A
	Total		- s	
	10/41		_ •	<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securitie in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is no known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	ne ot	0	\$
	Printing and Engraving Costs			\$
	Legal Fees			\$
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)		_	\$
	Other Expenses (identify)		_	\$
	Total		_	\$ <u>(2)</u>
			_	
(2)	Represents the value of the Common Shares issued in exchange for consulting services, based on the price. The Issuer will not receive funds in connection with the issuance of the Common Shares in exchange for coldn\$			

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	 b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to Pa 	g price given in respon	se to Pa	rt C -			
	the "adjusted gross proceeds to the issuer."						(3)
						3	(2)
5.	Indicate below the amount of the adjusted gross proceed						
	used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. The						
	the adjusted gross proceeds to the issuer set forth in respon						
				•			
				Payments to			
				Officers, Directors &			
				Affiliates			Payments to
			_		_	_	Others
	Salaries and Fees			\$		\$	
	Purchase of real estate			<u>\$</u>	. 🛚		
	Purchase, rental or leasing and installation of machinery and			\$	-	\$	
	Construction or lease of plant buildings and facilities		🛮	2		s	
	Acquisition of other businesses (including the value of secur offering that may be used in exchange for the assets or secur	rities involved in this					
	issuer pursuant to a merger)		🗖	\$		\$	
	Repayment of indebtedness			\$		s	
	Working capital			\$		s	
	Other (specify)						
					_		
				\$		\$	
	Column Totals		—	\$. 🗆	<u>s</u>	
	Total Payments Listed (column totals added)	••••	••	□ \$ <u> </u>	(2)		
	D. FEL	DERAL SIGNATURE					
	uer has duly caused this notice to be signed by the undersigned						
	e constitutes an undertaking by the issuer to furnish to the tion furnished by the issuer to any non-accredited investor pur				written re	quest	of its staff, the
miomi	tion furnished by the issuer to any non-accredited investor par	suam to paragraph (b)(2)) Of Rule	ν ν			
Issuer	(Print or Type)	Signature	-/-/			1 D	ate
	Planet Group Inc.			, //			
		Tial - C: (D-44 4/		/-//		17	1121915
	• • • • • • • • • • • • • • • • • • • •	Title of Signer (Print or	Type)				
Dami	en Reynolds 1	Director / (/	11				
(2) The *Cdn\$	lssuer will not receive funds in connection with the issuance of t	he Common Shares in ex-	change fo	or consulting services	i.		
Cans							
				<u>.</u>			
				•			
	A DECE						

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)